

DEPARTMENT OF THE NAVY

COMMANDER
NAVY REGION, MID-ATLANTIC
6506 HAMPTON BLVD.
NORFOLK, VA 23508-1273

IN REPLY REFER TO:

COMNAVREGMIDLANT INST 1770.1 N12

0 5 MAR 2002

COMNAVREG MIDLANT INSTRUCTION 1770.1

Subj: CASUALTY ASSISTANCE CALLS PROGRAM (CACP)

Ref:

- (a) DOD 1300.18
- (b) OPNAVINST 1770.1
- (c) BUPERSINST 1770.3
- (d) MILPERSMAN 1770-010 through 1770-230
- (e) BUMEDINST 5360.1
- (f) Casualty Assistance Calls Officer Handbook (NAVPERS 15607C)

Encl: (1) Casualty Assistance Calls Program

- (2) Procedure for CACP Action for Hampton Roads Area Activities and list of Participating Hampton Roads Area Activities
- (3) Participating Activities Areas of Responsibility for Casualty Assistance Calls/Funeral Honors Support Programs in 5-State Region (outside Hampton Roads Area)
- (4) Sub-area Coordinators
- (5) NAVPERS Form 1770/7
- (6) SF 1664 Form, Sample and blank form
- (7) Direct Deposit form
- 1. <u>Purpose</u>. To carry out the requirements for the Navy's Casualty Assistance Calls Program (CACP) within Commander, Navy Region, Mid-Atlantic (COMNAVREG MIDLANT) area of responsibility in accordance with references (a) and (b).
- 2. Cancellation. COMNAVREGMIDLANTINST 1771.1R. This revision includes guidelines for assignment of Casualty Assistance Calls Officers (CACOs); revises areas of responsibility for NAVMARCORESCEN Roanoke, VA; Huntington, WV; Moundsville, WV; Ebensburg, PA; and AEGIS Combat Systems Center, Wallops Island; and clarifies procedures for submission of travel claims for expenses incurred while performing CACO duties. This is a complete revision and shall be reviewed in its entirety.
- 3. <u>Background</u>. The Navy's CACP was initiated by Navy Personnel Command (COMNAVPERSCOM) to provide personal notification and/or necessary assistance (within practical limitations) to the Primary Next of Kin (PNOK) and/or the Secondary Next of Kin (SNOK) of those Navy personnel who become a casualty while on

active duty or active duty for training. This program also provides for personal notification and/or necessary assistance to specific former Naval personnel, certain dependents, members of other armed forces serving with or attached to Navy commands and civilians serving with or attached to Navy commands.

4. Policy. The CACP assists and guides the families of our servicemembers upon whom tragic circumstances have fallen. Regardless of the circumstances of the casualty, our response and assistance to these families will be handled with priority and the utmost understanding and sensitivity. Commanders at all levels will respond to the program's intended spirit and humanistic guidelines to ensure that every reasonable effort is made to help these families. Enclosure (1) provides specific guidance.

5. Scope

- a. By reference (b), COMNAVREG MIDLANT is assigned as the Casualty Assistance Calls Program Coordinator for the states of Virginia, West Virginia, Pennsylvania and Delaware, certain counties in North Carolina, Kentucky, and Maryland, and the country of Iceland. Enclosure (2) depicts the list of participating COMNAVREG MIDLANT subordinate activities for regional CACOs within the Hampton Roads area. Enclosure (3) depicts counties and responsible activities outside the Hampton Roads area for the Mid-Atlantic region.
- b. COMNAVREG MIDLANT retains the responsibility for implementation of the CACP within the Mid-Atlantic area and hereby establishes sub-area coordinators who shall:
- (1) Assign or re-assign CACOs from shore commands within their sub-area of responsibility, when directed by COMNAVREG MIDLANT Program Manager.
- (2) Ensure that the program is effectively managed and executed within their sub-area of responsibility.
- (3) Ensure that COMNAVREG MIDLANT Program Manager is notified in a timely manner of all CACO assignments, next of kin (NOK) notification, and any information pertinent to the program's operation in their sub-area of responsibility.
- (4) Maintain an accurate, up-to-date file on all cases within its geographical sub-area of responsibility and ensure all required reports are maintanined.
- (5) Implement a Mass Casualty Contingency Plan as directed by the Program Manager.

c. COMNAVREG MIDLANT Sub-area Coordinators and their area of responsibility are listed in enclosure (4).

6. Training

- a. All commands shall have at an adequate number of assigned, trained and capable CACOs. For commands of 50 or less personnel, a minimum of one junior officer and one senior enlisted CACO are essential to cover periods of training, leave and other absences and shall be assigned. For each additional 100 personnel (permanent and/or transient) assigned, add one junior officer and one senior enlisted CACO, up to a total of 10 CACOs. Substitution of junior officers and chief petty officers as appropriate for the mix of personnel assigned is acceptable.
- b. COMNAVREG MIDLANT Regional Program Manager conducts training in Norfolk, VA once a month. To obtain quotas call (757) 322-2831/2817 no less than two months prior to the desired training date. Training for Pennsylvania, Delaware and Iceland will be scheduled separately.

7. Naval Disasters or Accidents (Death/Injury) to more than 15 Personnel

- a. When there are numerous assignments to be made for personal notifications/CACOs in the Hampton Roads area, the alphabetical rotation responsibility, as listed in enclosure (2), is suspended. To avoid any one activity being overloaded, the COMNAVREG MIDLANT Regional Program Manager will disperse assignments among the listed participating activities and appropriate type commanders on an equitable basis.
- b. Generally, when an incident of this nature occurs, Commander, Navy Personnel Command (COMNAVPERSCOM), PERS 621 will alert the appropriate regional program managers. The Program Manager will immediately alert all activities and levy requirements for CACOs and chaplains to be placed in an immediate stand-by status, pending receipt of names and addresses of personnel and their next of kin.
- 8. Action. Activities listed in enclosures (2) and (3) are to provide an information sheet for the management of the CACP within COMNAVREG MIDLANT area of responsibility. Information sheets should be forwarded upon receipt of this instruction, and annually every 31 January thereafter, or as changes occur, to Commander, Navy Region, Mid-Atlantic (N12), 6506 Hampton Blvd., Norfolk, VA 23508-1273, in the following format:

- a. Rank/rate and full name of activity's Commanding Officer, Command CACO Coordinator and alternate CACO Coordinator.
- b. Command CACO Coordinator's office, pager, FAX, home and cellular phone numbers.
- c. List of CACOs on CACO watchbill, office, pager, FAX, home and cellular phone numbers, projected rotation date (PRD) or expiration of active obligated service (EAOS).
- d. The number of officers on board, less chaplains, with two or more years of service.
 - e. The number of senior enlisted (E7 or above) on board.
- f. Command's duty phone number and FAX machine phone number for the command.
 - g. The Plain Language Address (PLA) for message traffic.
 - h. Command's mailing address
- i. The number of chaplains assigned to the command and their religious affiliation.

Questions can be directed to the Regional Program Manager, Casualty Assistance Calls Program at 757-322-2817 or DSN 262-2817 during normal business hours (0700-1600). Requests for immediate assistance after-hours should be directed to the CACO Duty Officer at pager 757-521-9587, cellular 757-403-7370.

S. E. BARKER Chief of Staff

NAVHOSP Great Lakes

NAVMEDCLINIC Annapolis

NAVHOSP Patuxent River

NAVMEDCLINIC Quantico

BUMED (MED 332)

Distribution: www.cnrma.navy.mil

Copy to:

COMNAVPERSCOM (PERS-621)

COMNAVREG SE

COMNAVREG SW

COMNAVREG NW

COMNAVREG NE

COMNAVRESFOR

COMNAVDIST Washington

NAVMEDCEN Portsmouth (DAO)

MILMEDSUPPOFF Great Lakes

CASUALTY ASSISTANCE CALLS PROGRAM

- 1. <u>Background</u>. In all cases of death, missing, or Duty Status Whereabouts Unknown (DUSTWUN) status a Casualty Assistance Calls Officer (CACO) shall be designated to assist the PNOK and/or SNOK as prescribed in references (c) through (f). Responsibility for assignment of CACO is listed in paragraph 2c below. General guidelines for notification are as follows:
- a. CACO proceeds in government vehicle in the company of another service member, preferably a chaplain.
 - b. CACO calls are made between the hours of 0600 and 2400.
- c. Uniform for notification visit is Service Dress Blue or Summer White.

2. Procedure

- a. Assignment of potential CACOs:
- (1) Commands at all levels shall assign at least one commissioned officer, with no less than two years active duty, not of the Chaplain Corps, and one senior enlisted (E-7 and above) up to a total of 10 as their command CACOs. Utilization of duty office personnel is not authorized.
- (2) Commands at all levels should ensure individuals assigned CACO duties have a minimum of one year left at the command, and are familiar with references (c) through (f) and this instruction prior to making contact with the PNOK and/or SNOK.
- b. Reporting of a casualty. Reference (d) contains definitions, requirements, and procedures for initiating a Personnel Casualty Report (PCR). The PCR shall be submitted as a naval message with IMMEDIATE precedence by the Commanding Officer of the member who is a casualty, INFO COMNAVREG MIDLANT NORFOLK VA//N12// as Regional Program Manager. If a member becomes a casualty while away from their command, the Naval activity first apprised of the circumstances shall initiate the Personnel Casualty Report. That command should complete sections ALFA through HOTEL and request the member's command complete the report. In cases where the member's command is unknown, include a statement which requests COMNAVPERSCOM notify the member's command to complete the report.
 - c. Assignment of CACOs for PNOK/SNOK:
- (1) If the casualty is a member of a shore activity, a ship or an aviation activity in port within the Hampton Roads area and

the next of kin resides within a 50-mile radius, the CACP responsibility lies with the member's command. In the case of a deployed unit, the Type Commander shall designate a subordinate command to assume responsibility for the next of kin residing locally.

- (2) If the next of kin resides within the COMNAVREG MIDLANT area of responsibility (AOR) in Hampton Roads but there is no parent command in the area, the Regional Program Manager will determine activity responsibility for CACP action using enclosure (2) as a rotational duty.
- (3) If the next of kin resides within the COMNAVREG MIDLANT AOR but beyond the immediate vicinity of the member's command, the Regional Program Manager will determine activity responsibility for notification of PNOK/SNOK using enclosure (3).
- (4) If the next of kin resides outside the COMNAVREG MIDLANT AOR, the Regional Program Manager will contact the appropriate coordinator for that area.
- (5) When a ship or an aviation squadron is deploying prior to completion of CACO duties, the Commanding Officer shall ensure the case is referred to the appropriate Type Commander for reassignment of CACO.
- d. Assignment of Standby CACO. Article 1770-160 of reference (d) directs assignment of Standby CACO for all active duty members when any of the following conditions exist:
- (1) Member is placed on the very seriously ill/seriously injured list.
- (2) Member is in imminent danger or loss of life as defined by reference (d), Article 1770-080.
 - (3) Member is hospitalized overseas from next of kin.

Assignment of Standby CACOs will be at the direction of COMNAVPERSCOM (PERS 621). The Stand-By CACO will not contact the next of kin unless directed by COMNAVPERSCOM or the appropriate CACP Regional Program Manager.

- e. Assignment of Courtesy CACO. Courtesy CACOs will be assigned as deemed necessary. These assignments will be made to assist the PNOK and/or SNOK of:
- (1) Individuals seriously or very seriously ill/injured within CONUS for whom medical authorities have stated that the PNOK and/or SNOK presence is medically warranted. The Courtesy CACO's function will be to assist NOK with transportation from airport to hospital and/or reimbursement of bedside travel.

- (2) Individuals who are on the Temporary Disability Retirement List (TDRL) and die within 120 days of TDRL status. The Courtesy CACO's function will be to assist NOK obtain certain benefits, as instructed by PERS-621 via the Regional Program Manager.
 - (3) When requested by PERS-621.
- f. While COMNAVREG MIDLANT retains the responsibility for implementation of the CACP within the Mid-Atlantic area, this instruction hereby establishes Sub-Area Coordinators. Enclosure (4) depicts the designated Sub-Area Coordinators that will assist the Regional Program Manager with the management and execution of the Program within their geographical sub-area.

3. Reporting Requirements

- a. The Casualty Assistance Calls Program Report (NAVPERS Form 1770/7), enclosure (5), shall be submitted by the CACO to COMNAVPERSCOM (PERS 621) via COMNAVREG MIDLANT (N12):
- (1) An Initial report shall be forwarded to COMNAVREG MIDLANT (N12) immediately following the PNOK's and/or SNOK's application for all claims and benefits but no later than 30 days from the casualty.
- (2) A Final report shall be submitted to COMNAVREG MIDLANT (N12) immediately following notification from PNOK/SNOK that all benefits have been received, or when the PNOK/SNOK advise the CACO their services are no longer required. COMNAVREG MIDLANT (N12) will endorse NAVPERS Form 1770/7 and forward to PERS-621 to close the case.
- 4. CACO Reimbursement of Travel Expenses. Travel expenses for CACOs performing official duties in support of the CACP Program, when no government transportation is available, will be reimbursed from COMNAVREG MIDLANT funds. For local area expenses, submit Form SF 1164, enclosure (6), Claim for Reimbursement for Expenditures on Official Travel, together with enclosure (7), Electronic Funds Transfer (EFT) Certificate, to COMNAVREG MIDLANT (N12). Original receipts should be taped on an 8-1/2 X 11 sheet of paper. Mileage is paid at the rate of 34.5 cents per mile.
- 5. Notification of Next of Kin of Seriously Ill/Injured Personnel. Notification of both the PNOK/SNOK of personnel who become seriously ill/injured shall be made by the most expedient means available (usually by telephone) in accordance with reference (d). Responsibility for notification depends upon the location of hospitalization of the service member as shown below:

HOSPITALIZED IN

RESPONSIBILITY FOR NOTIFICATION

COMNAVREGMIDLANTINST 1770.1 0 5 MAR 2002

Naval Medical Treatment Facility in CONUS

Non-Naval Hospital in CONUS service

Naval or Non-Naval Hospital Overseas, or CONUS as a result service record. If unable or Naval disaster/accident

Commanding Officer, Naval Medical Medical Treatment Facility

Parent command/command holding record

Parent command/command holding impractical, contact COMNAVPERSCOM for assistance.

PROCEDURE FOR CACP ACTION FOR HAMPTON ROADS AREA ACTIVITIES

- 1. Participating activities in Hampton Roads shall institute a CACO Watchbill within their activity, identify a Command CACO Coordinator, and assign a point of contact for after-hours CACO assignment.
- 2. Activity will initiate Personnel Casualty Report and provide CACP action for next-of-kin that reside in Hampton Roads area for members of their own activity that have become a casualty.
- 3. In addition to providing a CACO when command suffers a casualty, CACP responsibility will be rotated amongst Hampton Roads activities when a casualty occurs where there is no parent command in Hampton Roads and either PNOK and SNOK reside in Hampton Roads, as well as during mass casualties. Responsibility may include but is not limited to the following actions:
 - a. Initiate the Personnel Casualty Report.
 - b. Assign a CACO to assist the next-of-kin.
- c. Coordinate the services of a Chaplain for accompanying CACO for the Notification visit.
- d. Assign a Stand-by CACO when requested by COMNAVPERSCOM via the Regional Program Manager (death imminent cases).
- e. Assign a Courtesy CACO when requested by COMNAVPERSCOM via the Regional Program Manager (Very Seriously Ill/Injured, Temporary Disability Retirement List -TDRL cases).
- 4. Assignment of CACO will be on a rotational basis, in alphabetical order, as shown below:

PARTICIPATING HAMPTON ROADS AREA ACTIVITIES

- 1. AIR OPERATIONS PM (NAVAL AIR STATION, OCEANA)
- 2. FACILITIES PM (NAVY PUBLIC WORKS CENTER)
- 3. INFORMATION TECHNOLOGY PM (NCTAMS LANT)
- 4. NAVMEDCEN PORTSMOUTH
- 5. NAVSHIPYD NORFOLK

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- 6. ORDNANCE PM (LANTORDCOM)
- 7. PORT OPERATIONS PM (NAVSTA NORFOLK)
- 8. PUBLIC SAFETY PM (NAVPHIBASE LITTLE CREEK)
- 9. SUPPLY AND LOGISTICS PM (FISC NORFOLK)
- 10. SUPPORT SERVICES PM (NAVSUPPACT NORFOLK)

The following activities will provide CACOs for their own communities when their units are deployed:

- 1. COMSUBLANT
- 2. COMNAVSURFLANT
- 3. COMNAVAIRLANT
- 4. COMFITWINGLANT
- 5. COMAEWWINGLANT

NAS Keflavik will support CACO responsibilities in Iceland.

AREAS OF RESPONSIBILITY FOR CASUALTY ASSISTANCE CALLS/FUNERAL HONORS SUPPORT PROGRAMS

NORTH CAROLINA COUNTIES

CAMDEN COMNAVREG MIDLANT */ CHOWAN COMNAVREG MIDLANT */ CURRITUCK COMNAVREG MIDLANT */ DARE COMNAVREG MIDLANT */ GATES COMNAVREG MIDLANT */ PASQUOTANK COMNAVREG MIDLANT */ PEROUIMANS COMNAVREG MIDLANT */ TYRRELL COMNAVREG MIDLANT */ COMNAVREG MIDLANT */ WASHINGTON

MARYLAND COUNTIES

DORCHESTER COMNAVDIST WASHINGTON DC

SOMERSET COMBATSYSCEN WALLOPS IS (for CACO)

COMNAVREG MIDLANT (for HONORS)

WICOMICO COMBATSYSCEN WALLOPS IS (for CACO)

COMNAVREG MIDLANT (for HONORS)

WORCESTER COMBATSYSCEN WALLOPS IS (for CACO)

COMNAVREG MIDLANT (for HONORS)

GARRETT NAVMARCORESCEN PITTSBURGH PA

DELAWARE

KENT NAVMARCORESCEN WILMINGTON DE

NEW CASTLE NAVMARCORESCEN WILMINGTON DE

SUSSEX NAVMARCORESCEN WILMINGTON DE

KENTUCKY COUNTIES

BOYD NAVRESCEN HUNTINGTON WV

CARTER NAVRESCEN HUNTINGTON WV

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Funeral Honors will be performed by COMNAVREG MIDLANT Ceremonial Guard.

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ELLIOT NAVRESCEN HUNTINGTON WV

FLOYD NAVRESCEN HUNTINGTON WV

GREENUP NAVRESCEN HUNTINGTON WV

HARLAN COMNAVREG SE JACKSONVILLE FL

JOHNSON NAVRESCEN HUNTINGTON WV

KNOTT NAVRESCEN HUNTINGTON WV

LAWRENCE NAVRESCEN HUNTINGTON WV

LETCHER COMNAVREG SE JACKSONVILLE FL

LEWIS NAVRESCEN HUNTINGTON WV

MAGOFFIN NAVRESCEN HUNTINGTON WV

MARTIN NAVRESCEN HUNTINGTON WV

MORGAN NAVRESCEN HUNTINGTON WV

PIKE NAVRESCEN HUNTINGTON WV

ROWAN NAVRESCEN HUNTINGTON WV

VIRGINIA COUNTIES

ACCOMACK COMBATSYSCEN WALLOPS IS (for CACO)

COMNAVREG MIDLANT (for HONORS)

ALBEMARLE NROTC UVA CHARLOTTESVILLE VA

AMELIA NAVMARCORESCEN RICHMOND VA

ALLEGHANY NROTC VMI LEXINGTON VA

AMHERST NAVMARCORESCEN ROANOKE VA

APPOMATTOX NAVMARCORESCEN ROANOKE VA

ARLINGTON COMNAVDIST WASHINGTON DC

AUGUSTA NROTC VMI LEXINGTON VA

BATH NROTC VMI LEXINGTON VA

BEDFORD NAVMARCORESCEN ROANOKE VA

BLAND NAVMARCORESCEN ROANOKE VA

BOTETOURT NROTC VMI LEXINGTON VA

BRISTOL NAVMARCORESCEN ROANOKE VA

BRUNSWICK NAVMARCORESCEN RICHMOND VA

BUCHANAN NAVMARCORESCEN ROANOKE VA

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BUCKINGHAM NAVMARCORESCEN RICHMOND VA

BUENA VISTA NROTC VMI LEXINGTON VA

CAMPBELL NAVMARCORESCEN ROANOKE VA

CAROLINE NAVMARCORESCEN RICHMOND VA

CARROLL NAVMARCORESCEN ROANOKE VA

CHARLES CITY NAVMARCORESCEN RICHMOND VA

CHARLOTTE NAVMARCORESCEN RICHMOND VA

CHARLOTTESVILLE NROTC UVA CHARLOTTESVILLE VA

CHESAPEAKE COMNAVREG MIDLANT */

CHESTERFIELD NAVMARCORESCEN RICHMOND VA

CLARKE COMNAVDIST WASHINGTON DC

CLIFTON FORGE NROTC VMI LEXINGTON VA

COLONIAL HEIGHTS NAVMARCORESCEN RICHMOND VA

COVINGTON NROTC VMI LEXINGTON VA

CRAIG NAVMARCORESCEN ROANOKE VA

CULPEPER NROTC UVA CHARLOTTESVILLE VA

CUMBERLAND NAVMARCORESCEN RICHMOND VA

DANVILLE NAVMARCORESCEN ROANOKE VA

DICKENSON NAVMARCORESCEN ROANOKE VA

DINWIDDIE NAVMARCORESCEN RICHMOND VA

EMPORIA COMNAVREG MIDLANT */

ESSEX NAMARCORESCEN RICHMOND VA

FAIRFAX COMNAVDIST WASHINGTON DC

FAUQUIER COMNAVDIST WASHINGTON DC

FLOYD NAVMARCORESCEN ROANOKE VA

FLUVANNA NROTC UVA CHARLOTTESVILLE VA

FRANKLIN COMNAVREG MIDLANT */

FRANKLIN NAVMARÇORESCEN ROANOKE VA

FREDERICK COMNAVDIST WASHINGTON DC

FREDERICKSBURG NAVMARCORESCEN RICHMOND VA

^{*/} Casualty Assistance Calls will be rotated IAW enclosure (2).
Funeral Honors will be performed by COMNAVREG MIDLANT Ceremonial Guard.

GALAX	NAVMARCORESCEN	ROANOKE	VA
GILES	NAVMARCORESCEN	ROANOKE	VA

GLOUCESTER COMNAVREG MIDLANT */

GOOCHLAND NAVMARCORESCEN RICHMOND VA

GRAYSON NAVMARCORESCEN ROANOKE VA

GREENE NROTC UVA CHARLOTTESVILLE VA

GREENSVILLE COMNAVREG MIDLANT */

HALIFAX NAVMARCORESCEN ROANOKE VA

HAMPTON COMNAVREG MIDLANT */

HANOVER NAVMARCORESCEN RICHMOND VA

HARRISONBURG NROTC VMI LEXINGTON VA

HENRICO NAVMARCORESCEN RICHMOND VA

HENRY NAVMARCORESCEN ROANOKE VA

HIGHLAND NROTC VMI LEXINGTON VA (for CACO)

NAVSECGRUACT SUGAR GROVE (for honors)

HOPEWELL NAVMARCORESCEN RICHMOND VA

ISLE OF WIGHT COMNAVREG MIDLANT */

JAMES CITY COMNAVREG MIDLANT */

KING AND QUEEN NAVMARCORESCEN RICHMOND VA

KING GEORGE COMNAVDIST WASHINGTON DC

KING WILLIAM NAVMARCORESCEN RICHMOND VA

LANCASTER COMNAVREG MIDLANT */

LEE NAVMARCORESCEN ROANOKE VA

<u>LEXINGTON</u> NROTC VMI LEXINGTON VA

LOUDOUN COMNAVDIST WASHINGTON DC

LOUISA NAVMARCORESCEN RICHMOND VA

LUNENBURG NAVMARCORESCEN RICHMOND VA

LYNCHBURG NAVMARCORESCEN ROANOKE VA

MADISON NROTC UVA CHARLOTTESVILLE VA

MARTINSVILLE NAVMARCORESCEN ROANOKE VA

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MATHEWS COMNAVREG MIDLANT */

MECKLENBURG NAVMARCORESCEN RICHMOND VA

MIDDLESEX COMNAVREG MIDLANT */

MONTGOMERY NAVMARCORESCEN ROANOKE VA

NEWPORT NEWS COMNAVREG MIDLANT */

NELSON NROTC UVA CHARLOTTESVILLE VA

NEW KENT NAVMARCORESCEN RICHMOND VA

NORFOLK COMNAVREG MIDLANT */

NORTHAMPTON COMBATSYSCEN WALLOPS IS (for CACO)

COMNAVREG MIDLANT (for HONORS)

NORTHUMBERLAND COMNAVREG MIDLANT */

NORTON NAVMARCORESCEN ROANOKE VA

NOTTOWAY NAVMARCORESCEN RICHMOND VA

ORANGE NROTC UVA CHARLOTTESVILLE VA

PAGE NROTC VMI LEXINGTON VA

PATRICK NAVMARCORESCEN ROANOKE VA

PETERSBURG NAVMARCORESCEN RICHMOND VA

PITTSYLVANIA NAVMARCORESCEN ROANOKE VA

PORTSMOUTH COMNAVREG MIDLANT */

POWHATAN NAVMARCORESCEN RICHMOND VA

PRINCE EDWARD NAVMARCORESCEN RICHMOND VA

PRINCE GEORGE NAVMARCORESCEN RICHMOND VA

PRINCE WILLIAM COMNAVDIST WASHINGTON DC

PULASKI NAVMARCORESCEN ROANOKE VA

RADFORD NAVMARCORESCEN ROANOKE VA

RAPPAHANNOCK NROTC UVA CHARLOTTESVILLE VA

RICHMOND NAVMARCORESCEN RICHMOND VA

RICHMOND NAVMARCORESCEN RICHMOND VA

ROANOKE NAVMARCORESCEN ROANOKE VA

ROANOKE NAVMARCORESCEN ROANOKE VA

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ROCKBRIDGE	NROTC VMI LEXINGTON VA	

ROCKINGHAM NROTC VMI LEXINGTON VA (for CACO)

NAVSECGRUACT SUGAR GROVE (for honors)

RUSSELL NAVMARCORESCEN ROANOKE VA

SALEM NAVMARCORESCEN ROANOKE VA

SCOTT NAVMARCORESCEN ROANOKE VA

SHENANDOAH NROTC VMI LEXINGTON VA (for CACO)

NAVSECGRUACT SUGAR GROVE (for honors)

SMYTH NAVMARCORESCEN ROANOKE VA

SOUTH BOSTON NAVMARCORESCEN ROANOKE VA

SOUTHAMPTON COMNAVREG MIDLANT */

SPOTSYLVANIA NAVMARÇORESCEN RICHMOND VA

STAFFORD COMNAVDIST WASHINGTON DC

STAUNTON NROTC VMI LEXINGTON VA

SUFFOLK COMNAVREG MIDLANT */

SURRY COMNAVREG MIDLANT */

SUSSEX COMNAVREG MIDLANT */

TAZEWELL NAVMARCORESCEN ROANOKE VA

VIRGINIA BEACH COMNAVREG MIDLANT */

WARREN NAVDIST WASHINGTON DC

WASHINGTON NAVMARCORESCEN ROANOKE VA

WAYNESBORO NROTC VMI LEXINGTON VA

WESTMORELAND NAVDIST WASHINGTON DC

WILLIAMSBURG COMNAVREG MIDLANT */

WINCHESTER COMNAVDIST WASHINGTON DC

WISE NAVMARCORESCEN ROANOKE VA

WYTHE NAVMARCORESCEN ROANOKE VA

YORK COMNAVREG MIDLANT */

*/ Casualty Assistance Calls will be rotated IAW enclosure (2).
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WEST VIRGINIA COUNTIES

BARBOUR NAVSECGRUDET SUGAR GROVE WV

BERKELEY COMNAVDIST WASHINGTON DC

BOONE NAVRESCEN HUNTINGTON WV

BRAXTON NAVRESCEN HUNTINGTON WV

BROOKE NAVMARCORESCEN MOUNDSVILLE WV

CABELL NAVRESCEN HUNTINGTON WV

CALHOUN NAVRESCEN HUNTINGTON WV

CLAY NAVRESCEN HUNTINGTON WV

DODDRIDGE NAVMARCORESCEN MOUNDSVILLE WV

FAYETTE NAVRESCEN HUNTINGTON WV

GILMER NAVRESCEN HUNTINGTON WV

GRANT NAVSECGRUDET SUGAR GROVE WV

GREENBRIER NAVRESCEN HUNTINGTON WV

HAMPSHIRE NAVSECGRUDET SUGAR GROVE WV

HANCOCK NAVMARCORESCEN MOUNDSVILLE WV

HARDY NAVSECGRUDET SUGAR GROVE WV

HARRISON NAVMARCORESCEN MOUNDSVILLE WV

JACKSON NAVRESCEN HUNTINGTON WV

JEFFERSON COMNAVDIST WASHINGTON DC

KANAWHA NAVRESCEN HUNTINGTON WV

LEWIS NAVRESCEN HUNTINGTON WV

LINCOLN NAVRESCEN HUNTINGTON WV

LOGAN NAVRESCEN HUNTINGTON WV

MARION NAVMARCORESCEN MOUNDSVILLE WV

MARSHALL NAVMARCORESCEN MOUNDSVILLE WV

MASON NAVRESCEN HUNTINGTON WV

McDOWELL NAVRESCEN HUNTINGTON WV

MERCER NAVRESCEN HUNTINGTON WV

MINERAL COMNAVDIST WASHINGTON DC

MINGO NAVRESCEN HUNTINGTON WV

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MONONGALIA NAVMARCORESCEN MOUNDSVILLE WV MONROE NAVMARCORESCEN ROANOKE VA MORGAN COMNAVDIST WASHINGTON DC NICHOLAS NAVRESCEN HUNTINGTON WV OHIO NAVMARCORESCEN MOUNDSVILLE WV PENDLETON NAVSECGRUDET SUGAR GROVE WV PLEASANTS NAVMARCORESCEN MOUNDSVILLE WV **POCAHONTAS** NAVSECGRUDET SUGAR GROVE WV PRESTON NAVMARCORESCEN MOUNDSVILLE WV NAVRESCEN HUNTINGTON WV PUTNAM RALEIGH NAVRESCEN HUNTINGTON WV NAVSECGRUDET SUGAR GROVE WV RANDOLPH RITCHIE NAVRESCEN HUNTINGTON WV ROANE NAVRESCEN HUNTINGTON WV SUMMERS NAVMARCORESCEN ROANOKE VA NAVMARCORESCEN MOUNDSVILLE WV TAYLOR TUCKER NAVSECGRUDET SUGAR GROVE WV TYLER NAVMARCORESCEN MOUNDSVILLE WV UPSHUR NAVRESCEN HUNTINGTON WV WAYNE NAVRESCEN HUNTINGTON WV NAVRESCEN HUNTINGTON WV WEBSTER WETZEL NAVMARCORESCEN MOUNDSVILLE WV WIRT NAVRESCEN HUNTINGTON WV

WOOD NAVRESCEN HUNTINGTON WV

WYOMING NAVRESCEN HUNTINGTON WV

PENNSYLVANIA COUNTIES

ADAMS CACO - NAVICP MECHANICSBURG PA
Honors - NAVMARCORESCEN HARRISBURG

ALLEGHENY CACO - Rotate NAVMARCORESCEN Pittsburgh

and NROTC Carnegie Mellon

Honors - NAVMARCORESCEN Pittsburgh, PA

ARMSTRONG CACO - Rotate NAVMARCORESCEN Pittsburgh

and NROTC Carnegie Mellon

Honors - NAVMARCORESCEN Pittsburgh, PA

BEAVER CACO - Rotate NAVMARCORESCEN Pittsburgh

and NROTC Carnegie Mellon

Honors - NAVMARCORESCEN Pittsburgh, PA

BEDFORD NAVMARCORESCEN EBENSBURG PA

BERKS NAVMARCORESCEN READING PA

BLAIR NAVMARCORESCEN EBENSBURG PA

BRADFORD NAVRESCEN AVOCA PA

BUCKS NAS/JRB WILLOW GROVE PA

BUTLER CACO - Rotate NAVMARCORESCEN Pittsburgh

and NROTC Carnegie Mellon

Honors - NAVMARCORESCEN Pittsburgh, PA

CAMBRIA NAVMARCORESCEN EBENSBURG PA

CAMERON NROTC PENN STATE PA

CARBON NAVRESCEN AVOCA PA

CENTRE NROTC PENN STATE PA

CHESTER NAS/JRB WILLOW GROVE PA

CLARION CACO - Rotate NAVMARCORESCEN Pittsburgh

and NROTC Carnegie Mellon

Honors - NAVMARCORESCEN Pittsburgh, PA

CLEARFIELD NROTC PENN STATE PA

CLINTON NROTC PENN STATE PA

COLUMBIA NAVRESCEN AVOCA PA

CRAWFORD NAVMARCORESCEN ERIE PA

CUMBERLAND CACO - NAVICP MECHANICSBURG PA

Honors - NAVMARCORESCEN HARRISBURG

DAUPHIN CACO - NAVICP MECHANICSBURG PA

Honors - NAVMARCORESCEN HARRISBURG PA

DELAWARE NAS/JRB WILLOW GROVE PA

0 5 MAR 2002

ELK NAVMARCORESCEN ERIE PA

ERIE NAVMARCORESCEN ERIE PA

FAYETTER CACO - Rotate NAVMARCORESCEN Pittsburgh

and NROTC Carnegie Mellon

Honors - NAVMARCORESCEN Pittsburgh, PA

FOREST NAVMARCORESCEN ERIE PA

FRANKLIN CACO - NAVICP MECHANICSBURG PA

Honors - NAVMARCORESCEN HARRISBURG PA

FULTON NAVMARCORESCEN EBENSBURG PA

GREENE NAVMARCORESCEN PITTSBURGH PA

HUNTINGDON NAVMARCORESCEN EBENSBURG PA

INDIANA NAVMARCORESCEN EBENSBURG PA

JEFFERSON NAVMARCORESCEN EBENSBURG PA

JUNIATA CACO - NAVICP MECHANICSBURG PA

Honors - NAVMARCORESCEN HARRISBURG PA

LACKAWANNA NAVRESCEN AVOCA PA

LANCASTER NAVMARÇORESCEN READING PA

LAWRENCE CACO - Rotate NAVMARCORESCEN Pittsburgh

and NROTC Carnegie Mellon

Honors - NAVMARCORESCEN Pittsburgh, PA

LEBANON CACO - NAVICP MECHANICSBURG PA

Honors - NAVMARCORESCEN HARRISBURG PA

LEHIGH NAVMARCORESCEN LEHIGH VALLEY PA

LUZERNE NAVRESCEN AVOCA PA

LYCOMING NROTC PENN STATE PA

MCKEAN NAVMARCORESCEN ERIE PA

MERCER NAVMARCORESCEN ERIE PA

MIFFLIN NROTC PENN STATE PA

MONROE NAVRESCEN AVOCA PA

MONTGOMERY NAS/JRB WILLOW GROVE PA

MONTOUR NAVMARCORESCEN HARRISBURG PA

NORTHAMPTON NAVMARCORESCEN LEHIGH VALLEY PA

NORTHUMBERLAND NAVMARCORESCEN HARRISBURG PA

PERRY CACO - NAVICP MECHANICSBURG PA

Honors - NAVMARCORESCEN HARRISBURG PA

0 5 MAR 2002

PHILADELPHIA NAS/JRB WILLOW GROVE PA

PIKE NAVRESCEN AVOCA PA

POTTER NROTC PENN STATE PA

SCHUYLKILL NAVMARCORESCEN READING PA

SNYDER NAVMARCORESCEN HARRISBURG PA

SOMERSET CACO - Rotate NAVMARCORESCEN Pittsburgh

and NROTC Carnegie Mellon

Honors - NAVMARCORESCEN Pittsburgh, PA

SULLIVAN NAVRESCEN AVOCA PA

SUSQUEHANNA NAVRESCEN AVOCA PA

TIOGA NROTC PENN STATE PA

UNION NAVMARCORESCEN HARRISBURG PA

VENANGO NAVMARCORESCEN ERIE PA

WARREN NAVMARCORESCEN ERIE PA

WASHINGTON CACO - Rotate NAVMARCORESCEN Pittsburgh

and NROTC Carnegie Mellon

Honors - NAVMARCORESCEN Pittsburgh, PA

WAYNE NAVRESCEN AVOCA PA

WESTMORELAND CACO - Rotate NAVMARCORESCEN Pittsburgh

and NROTC Carnegie Mellon

Honors - NAVMARCORESCEN Pittsburgh, PA

WYOMING NAVRESCEN AVOCA PA

YORK CACO - NAVICP MECHANICSBURG PA

Honors - NAVMARCORESCEN HARRISBURG PA

SUB-AREA COORDINATORS WITHIN COMNAVREG MIDLANT FOR CASUALTY ASSISTANCE OFFICERS

PENNSYLVANIA

Command

Geographical Sub-area

NAVICP MECHANICSBURG

MECHANICSBURG PA 1/

NAS JRB WILLOW GROVE

GREATER PHILADELPHIA PA 2/

NAS KEFLAVIK

ICELAND 3/

 $[\]underline{1}/$ CACO responsibilities will be rotated between all Naval commands in Mechanicsburg, PA.

 $[\]underline{2}/$ CACO responsibilites will be rotated between all Naval commands in Philadelphia area.

 $[\]underline{3}/$ CACO responsibilites will be rotated between all Naval commands in NAS Keflavik

	CASU	ALTY	ASSISTA	NCE	CALLS	PROGRA	M		
Via: Commander	, Navy Personnel Commar , Navy Region, Mid Atla	ntic (N	12)				<u>-</u> :.	Report BUPERS Date:	
or contact me claims benefit closed. List	A casualty assistance call was made and assistance rendered as indicated. The next of kin was requested to advise or contact me or my successor on any matter where difficulty is encountered and to advise when all payments for claims benefits or rights are received. BUPERS and the cognizant CACO Coordinator will be advised when the case is closed. List an asterisk (*) beside any item to indicate the placement of comments in the Remarks Section. Name of Deceased: RANK/RATE: SSN: DATE OF DEATH:								
NAME ADDRESS A	ND RELATIONSHIP OF PERS	ON BEING	G ASSISTED:	·		DATE BUPE	RS BEN	EFITS LETTER REC	CEIVED:
DATE AND TIME	OF NOTIFICATION:					DATE LETT	ER OF	CIRCUMSTANCES RE	CCEIVED:
CACP MANUAL	<u> </u>	SUB	JECT				ACTION	(AS APPROPRIATE	2)
REFERENCE						DATE APPLI	ED FOR	DATE RECEIVED	N/A
APPENDIX E	REPORT OF CASUALTY (Di other agencies)	1300)	(Furnished to	next o	f kin and				
CHAP VI	DEPENDENTS ALLOTMENTS	AND ALL	OWANCES						
		CLAIM	S AND APPL	ICATIO	NS SUBMIT	TTED			
CHAP V	BURIAL ENTITLEMENTS: A. NAVY B. SOCIAL SECURITY ADM	INISTRA	TION				•		
CHAP V	DEATH GRATUITY								
CHAP VI	UNPAID COMPENSATION (Unpaid Pay and Allowances)								
CHAP VI	SURVIVOR BENEFIT PLAN		(Applicable	to memb	ers with				•
CHAP VI	SERVICEMEMBER'S GROUP	LIFE IN	SURANCE (Subm	it clai	m to				
CHAP VI	COMMERCIAL LIFE INSURA in remarks the name of insurance is carried)	the cor	mpany which c	ommerci	al				
CHAP VI	UNIFORMED SERVICES IDE 1173) (May include med privileges)								
CHAP VI	DEPENDENCY AND INDEMNI	TY COMPI	ENSATION						
CHAP VI	SOCIAL SECURITY SURVIV			claim t	o local				
CHAP VI	DEPENDENTS' TRAVEL CLA	AIM (Cla:	ims are settl	ed by l	ocal PSD)		,		
CHAP V-VI	TRANSPORTATION OF HOUS	SEHOLD GO	OODS/PERSONAL	EFFECT	S		_		
CHAP V	GOVERNMENT HEADSTONE (if burial is in nation			n not r	equired				
	ASSISTANCE REQUIRE	D (Ind	icate in "R	emarks'	to whom	referred :	for as	ssistance)	
CHAP VII	INCOME TAX (W-2 furnis				by DFAS				
CHAP VII	BANK ACCOUNTS, SAVINGS		<u> </u>		ATE, WILL	_			

	INVESTIGATIVE REPORTS	REQUEST (As ap	plicable)		
CHAP IV	JAGMAN INVESTIGATIVE REPORT				
	NCIS INVESTIGATIVE REPORT				
	AIRCRAFT MISHAP INVESTIGATIVE REPORT				
	☐ INITIAL ☐ IN	NTERIM		☐ FINAL	
SPECIAL REQUES	TS MADE BY BENEFICIARY:				
ACTION TAKEN B	Y CACO:				
ACTION DESIRED	BY BUPERS AS FOLLOWS:				
GENERAL REMARK	S: (Include liaison and contacts with agenci	es. Individuals an	nd relatives	commants observat	ions
recommendation	s and comments of next of kin)				
ADDRESS OF NEX	T OF KIN		CACO	DSN/COMMERCIAL PH	ONE Nos.
☐ NO CH	HANGE NEW ADDRESS IS:			,	
SIGNATURE AND	RANK/RATE OF CACO MAKING REPORT:	ACTIVITY	TO WHICH ATTA	CHED:	
	FTRST EN	DORSEMENT			
	er, Navy Region, Mid-Atlantic r, Navy Personnel Command (PERS-621)		DATE:		
1. Forwarde	d	SIGNATURE:			

CLAIM FOR REIMBURSEMENT FOR EXPENDITURES				1. DEPARTMENT OR ESTABLISHN	MENT, BUREAU, DIVI	ISION OR OFFICE		2. VOUCHER NUMBER					
			DFFICIAL BUSINESS					3. SCHED	ULE NUME	ER			
			•	Statement on the back of thi	is form.			5. PAI	D BY				
4.	a. NAME /	ast, first,	middle initial)	b. SOCIAL SECURITY NO.									
CLAIMANT			DOE, CACO FOR: (LAST	NAME OF CASU	VAME OF CASUALTY) 111-11-1111								
Ę			STREET			a, di noc recentone i	OWNER	1					
	AME	RICA	A, UN 11111			(333) 3:	33-3333						
6. EX	PENDITU	RES	(If fare claimed in col. (g) exceeds charge for claimant.)	r one person, show in col. (h) the	e number of additi						· · · ·		
	DATE		Show appropriate code in col. (b):			· <u></u>				AMOUNT CL	AIMED		
1	C A-Local travel D B-Telephone or telegraph, or D C-Other Expenses (itemized)					·	MILÉAGE RATE ¢	MILEAGE		FARE	ADD PER-	TIPS AND MISCEL-	
	(a)		(c) FROM	expenditures in specific detail.)	(d) T0		NO. OF MILES			OR TOLL	SONS	LANE	ous
	OCT	(b)	(c) Thola	(8) 10			(e)	(f)		(g)	(h)	(i)	,
		Α	NAB LITTLE CREEK	CHEAPEAKE (PNOK)			60	\$20	70	ĺ			
2	OCT	A	NAB LITTLE CREEK	NORFOLK	A ID DOD?	r	30	\$10	25				
3	OCT		TWO DITTED CREEK	NORI GER	AIRI OK		30	ΔiΩ	33				
	0.075	В	CELLULAR									\$63	.85
	OCT	С	CERTIFIED MAIL	(INCLUDE	RECEIPT	<u>.</u>						\$3	95
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If addi	tional area		luired continue on the back.	SUBTOTALS CARRIE	A COMMAND COOL	THE DAME		<u> </u>			+ +		[[
	uunai spac	e is req	uneu continue un the back.	300 TOTALS CARRIED	D FORWARD FROM	THE BAGA							
7. AMC	OUNT CLAI	MED (Ta	otal of cols. (f), (g) and (i).)	\$ 98.85		TOTALS	90	\$31	05			\$67	,80
as n are i	ecessary in included, the	the inter approvi	ong distance telephone calls, if shown, are certified rest of the Government. (Note: If long distance calling official must have been authorized, in writing, by	5	10. l c	ertify that this claim i lief and that payment	s true and correct t or credit has not be	to the best o sen received	f my knov by me.	vledge and			
tne	nead of the	aepartm	ent or agency to so certify (31 U.S.C 680a).)		PAYME	NT DESIRED		Sign Original	Only				
			Sign Original Only		1 —	. —	CASH				DATE		
				1 = 1 = 2	CLAIM/ SIGN H	ÈRE (CACO SIG	NATU	RE			Date	
APPRO	ying .			DATE	11. a. PAYE	E <i>(Signature)</i>	CAS	H PAYMEN	T RECEIF		ATE RECEIVE	n	
OFFICE SIGN H	AL					_ ,g1m v/							
9. This	claim is ce	rtified co	errect and proper for payment.								MOUNT		
AUTHO CERTIF OFFICE SIGN H	R	.	Sign Original Only	DATE		MENT MADE				\$			
	UNTING CL	ASSIFIC	ATION										

Mileage = 34.5 cents a mile

CLAIM FOR REIMBURSEMENT FOR EXPENDITURES				1. DEPARTMENT OR ESTABLISHMENT									
		ON	OFFICIAL BUSINESS				3. SCHEDULE NUMB	IER					
				Statement on the back of this fo			5. PAID BY						
4. ⊑	a. NAME (L	ast, first	middle initial)		b. SOCIAL SECURITY	NO.							
CLAIMANT	c. MAILING	ADDRES	SS (Include ZIP Code)		d. OFFICE TELEPHONE	NÜMBER							
6. EX	 KPENDITU	RES	(If fare claimed in col. (g) exceeds charge fo	or one person, show in cal. (h) the nu	mber of additional persons which a	ccompanied the	1						
	DATE		Show appropriate code in col. (b):			<u> </u>		AMOUNT CLA	AIMED				
	19	C O D E	A-Local travel B-Telephone or telegraph, or C-Other Expenses <i>(itemized)</i>	ovenditurne is enceific detail l		MILEAGE RATE ¢ NO. OF	MILEAGE	FARE OR TOLL	ADD PER-	TIPS AND MISCEL-			
	(a)	(b)	(c) FROM	expenditures in specific detail.)	(d) TO	(f)	(g)	SONS (h)	LANEOUS (i)				
		ł											
If add	itional spac	e is red	quired continue on the back.	SUBTOTALS CARRIED FO	RWARD FROM THE BACK								
7. AM	QUNT CLAIR	MED /T	otal of cols. (f), (g) and (i).)	· \$	TÓTALS								
as i are	necessary in included, the	the inte e approv	Long distance telephone calls, if shown, are certifie rest of the Government. (Note: If long distance car ing official must have been authorized, in writing, b nent or agency to so certify (31 U.S.C 680a).) Sign Original Only	Vs	10. I certify that this claim belief and that paymen PAYMENT DESIRED CHECK CLAIMANT SIGN HERE	t or credit has not b	to the best of my know een received by me. Sign Original Only	wledge and	DATE				
APPRI	OVING			DATE	11. a. PAYEE (Signature)	CAS	H PAYMENT RECEIF		ATE RECEIVE	n			
OFFIC SIGN	IAL HERE				(ingrettiis)			J. D.					
9. Thi	s claim is cer	rtified c	orrect and proper for payment.						MOUNT				
AUTH CERTI OFFIC SIGN		>	Sign Original Only	DATE	12. PAYMENT MADE BY CHECK NO.			\$					

ACCOUNTING CLASSIFICATION

DATE C Show appropriate code in col. (c) O A-Local travel D B-Telephone or telegraph, or E C-Other Expenses (itemized) (a) (b) (c) FF	(Explain expenditures in specific detail.)	(d) TO	MILEAGE RATE ¢ NO. OF MILES (e)	MILEAGE (f)	FARE OR TOLL	ADD. PER- SONS	TIPS AND MISCEL- LANEOUS	
	(Explain expenditures in specific detail.)	(d) TO	k NO OE		1			
(a) (b) (c) FF	IOM .	(d) TO	(e)	(f)	(g)			
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	Total each column and a	enter on the front, subtotal line		 				

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chapter 57 as implemented by the Federal Travel Regulations (FPMR 101-7), E.O. 11809 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 28 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or raimbursement to eligible individuals for allowable travel analyor other expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by Federal eigency officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local, or foreign agencies, when relevant to civil, criminal, or regulatory investigations or prosecutions, or when pursuant to a requirement by this agency in correction with the firing of an employee, the issuence of a security account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 937, November 22, 1843, for use as a taxpeyer and/or employee identification number; disclosure is MANDATORY on vouchers claiming payment or reimbursement which is, or may be, taxable income. Disclosure of your SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or less of reimbursement.

#### **ELECTRONIC FUNDS TRANSFER (EFT) CERTIFICATE**

AUTHORITY: DEBT COLLECTION IMPROVEMENT ACT OF 1996, PUBLIC LAW 104-1354. PUBLIC LAW 104-134 REQUIRES THAT ALL FEDERAL PAYMENTS SHALL BE PAID MY MEANS OF EFT.

PURPOSE: TO ENSURE REIMBURSEMENTS ARE MADE TO MILITARY MEMBERS AND CIVILIAN EMPLOYEES WHO PERFORM OFFICIAL TRAVEL ARE CREDITED IN THEIR ELECTRONIC FUNDS TRANSFER ACCOUNT IN TIMELY MANNER.

ROUTINE USES: TO AUTHORIZE A FINANCIAL INSTITUTION CHOSEN BY AN INDIVIDUAL TO CREDIT THEIR EFT ACCOUNTS.

DISCLOSURE IS MANDATORY. FAILURE TO FURNISH INFORMATION REQUESTED MAY RESULT IN NON-PAYMENT OF TRAVEL PAY ENTITLEMENTS OR MAY DELAY RECEIPT OF PAYMENT TO

OUR EFT ACCOUNT.							
*******	**********	***					
NAME:	SSN:						
	SSN:						
HOME PHONE:							
	<del>.</del>						
FINANCIAL INSTITUTION'S ROUTIN	NG TRANSIT NUMBER (RTN):						
	UTION OR BOTTOM PART OF YOUR PERSONAL CHECK)						
(OR YOU MAY ATTACH A "	VOID" CHECK AT BOTTOM OF FORM)						
ACCOUNT TYPE (CHECK ONE):	CHECKING SAVINGS						
ACCOUNT NUMBER:							
SIGNATURE:	DATE:						